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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

TEMPORARY FORM D

OMB APPROVAL
OMB Number: 3235-0076
Expires: March 15, 2009
Estimated average burden
hours per response. . . . . . 4.00

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## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEMPTIO



UNIFORMLIMITED OFFERING EXEMI	
Name of Offering (	09035587
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section	14(6) ULOE
Type of Filing: New Filing Amendment	_
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
LUMEN GLOBAL GROWTH LP	Title to Number (Including Area Code)
Address of Executive Offices (Number and Street, City, State, Zip Code)  ONE FERRY BUILDING, #255, SAN FRANCISCO, CA 94111	Telephone Number (Including Area Code) (415) 677-1558
Address of Principal Business Operations (Number and Street, Cily, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
INVESTMENTS	<b>7. 1.</b>
Type of Business Organization    corporation   limited partnership, already formed   other (p	ease specify): PROCESSED
Actual or Estimated Date of Incorporation or Organization:	MAR 2 7 2009
Actual or Estimated Date of Incorporation or Organization:	THORAGO
CN for Canada; FN for other foreign jurisdiction)	GIR IHOIVISON RELITER
GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using comply with all the requirements of § 230.503T.  Federal:  Who Must File: All issuers making an offering of securities in reliance on an exception under Regulated. Or 15 U.S.C. 77d(6).  When To File: A notice must be filed no later than 15 days after the first sale of securities in the observations and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address after the date on which it is due, on the date it was mailed by United States registered or centile. U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20 Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be must be a photocopy of the manually signed copy or bear typed or printed signatures.  Information Required: A new filling must contain all information requested. Amendments need only any changes thereto, the information requested in Part C, and any material changes from the information Part E and the Appendix need not be filed with the SEC.  Filling Fee: There is no federal filing fee.  State:  This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE)	R 239.500T) or an amendment to such a red, an issuer also may file in paper format an Form D (17 CFR 239.500) and otherwise ation D or Section 4(6), 17 CFR 230.501 et fering. A notice is deemed filed with the U.S. address given below or, if received at that different mail to that address.  149.  149.  149.  159.  169.  179.  189
have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate each state where sales are to be, or have been made. If a state requires the payment of a fee as a price in the proper amount shall accompany this form. This notice shall be filed in the appropriate at Appendix to the notice constitutes a part of this notice and must be completed.  ATTENTION	notice with the Securities Administrator in econdition to the claim for the exemption, a tes in accordance with state law. The
Failure to file notice in the appropriate states will not result in a loss of the federal exe appropriate federal notice will not result in a loss of an available state exemption unless filing of a federal notice.	mption. Conversely, failure to file the s such exemption is predictated on the

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
LUMEN ADVISORS, LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
ONE FERRY BUILDING, STE 256, SAN FRANCISCO, CA 94111
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director MANAGING MEMBER OF GENERAL PARTNE
Full Name (Last name first, if individual)
NOCERA, SIMON E.
Business or Residence Address (Number and Street, City, State, Zip Code)
ONE FERRY BUILDING, STE 255, SAN FRANCISCO, CA 94111
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
PUTNAM, DONALD H.
Business or Residence Address (Number and Street, City, State, Zip Code)
ONE FERRY BUILDING, STE 255, SAN FRANCISCO, CA 94111
Check Box(cs) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
theck Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
ull Name (Last name first, if individual)
susiness or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer													
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	,			1	В.	INFORMA	TION ABO	UT OFFE	RING	· · · ·	· · · · · ·	<u> </u>	· ',
Answer also in Appendix, Column 2, if filting under ULOE.  2. What is the minimum investment that will be accepted from any individual?			144	dha iaawaa				inconsons i	in this offe	rino?			
2. What is the minimum investment that will be accepted from any individual?	i. Has ti	ie issuer so	or dacs								***************	U	A
** WMAY DE WALVE d.  3. Does the offering permit joint ownership of a single unit?	2 W/hat	is the mini	mum inves									<b>s</b> l.	000.000
3. Does the offering permit joint ownership of a single unit?  4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or a similar remoneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed as an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual) States)  All AX						opted non							,
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering.  If a person to be listed is an associated person or agent of a broker or dealer to be registered with the SEC and/or with a sate or sates, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)	3. Does	the offering	g permit joi	int owners								, ,	
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## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Offering Price Sold Type of Security Equity ......\$\_ Common Preferred Convertible Securities (including warrants)......\$\_ Other (Specify Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only) ٥ Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Type of Offering Security Sold Rule 505 ..... Regulation A ..... Rule 504 ..... Total ..... a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs.....

Total .....

Other Expenses (identify)

	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."			\$ <u>99,</u> 4	1 <u>65,</u> 800.
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.				·
		) Dir	yments to Officers, rectors, & Miliates		ments to
	Salaries and fees		0	□ <b>s</b>	0
	Purchase of real estate	□ <b>\$</b> _	_0	□ <b>2</b>	0
	Purchase, rental or leasing and installation of machinery and equipment			□ s	ð
	Construction or leasing of plant buildings and facilities	<b>□</b> \$_	0	□ <b>s</b>	0
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		_	□ <b>\$</b>	0
	Repayment of indebtedness	_	•	□\$	0
	Working capital	_	0	X 244	<u>,965<sub>4</sub>80</u> 0.
	Other (specify):	□ <b>\$</b> _	_0	□ <b>s</b> —	0
		\$	0	s	0
	Column Totals			<b>数s</b> 90	1965,800
	Total Payments Listed (column totals added)		⊠s <u>99</u>	965,8	200.00
	D. FEDERAL SIGNATURE	,	•	· · · · ·	· .
e r	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of i	sion, 1	upon writter	le 505, the a request	following of its staff,
su W	HER GLOBAL GROWTH LP  LIMEN ADVISORS, LLC, Its GENERAL PARTNER  Signature  Signature  Signature	Date	13 MA	R 200	29
an	ne of Signer (Print or Type)  Title of Signer (Print or Type)				•
51	MONE, NOCERA MANAGING MEMBER CO	1			

**LND** 

## ATTENTION